



**KANSAS DEPARTMENT OF
HEALTH AND ENVIRONMENT**

ANNUAL REPORT 2009

DEAR FELLOW KANSANS

The mission of the Kansas Department of Health and Environment (KDHE) is to protect the health and environment of all Kansans by promoting responsible choices. This is a mission that KDHE works everyday to fulfill. And, 2009 was no exception. Throughout 2009, we accomplished much and faced challenges, though perhaps none as critical as the 2009 H1N1 influenza virus. Throughout the year, our focus was on carrying out our mission and I am extremely proud of our agency's work.

2009 Accomplishments

In March 2009, we welcomed, from California, Dr. Jason Eberhart-Phillips as our new state health officer and later appointed KDHE employee Charlie Hunt as the state epidemiologist. Both of these employees and their staff proved invaluable in the face of the H1N1 pandemic.

In April 2009, Kansas became one of the first states to have confirmed cases of the H1N1 virus. The agency's emergency operations center was activated and personnel from all divisions and bureaus worked together — tracking the spread of the virus, preparing plans for a possible pandemic, initiating communications with local health departments, educating communities about the virus, raising public awareness and subsequently coordinating the vaccine distribution.

In July 2009, we established the Bureau of Environmental Health (BEH). BEH combines the activities of the Healthy Homes and Lead Hazard Prevention Program and the Radiation and Asbestos Control Section, and is the home of the newly established Environmental Public Health Tracking Program. This new program is developing applications to collect, analyze, interpret and publish environmental health data indicators as part of the National Environmental Public Health Tracking Network.

Development of the network is part of a national initiative led by the Centers for Disease Control and Prevention and will include the development of a web-based system to track key environmental hazards and health problems across Kansas. When implemented, the tracking network will help us identify threats to the health of Kansans posed by the environment and will improve how KDHE can respond to those threats.

During the last half of 2009, work began on the Health Information Technology/Health Information Exchange initiative, with KDHE leading the charge. To guide the planning and implementation process to connect Kansas health care systems together electronically, KDHE convened an expanded e-Health Advisory Council (eHAC). The eHAC is a broad base of health care stakeholders representing more than 30 health care organizations.

The eHAC divided into workgroups throughout 2009 to look at five specific areas of the project: governance, technology, business operations, finance and legal. In January, the eHAC will begin consolidating the efforts of the work groups into a strategic plan for Kansas.

In December 2009, our Bureau of Health Promotion hosted the first Cultivating Healthy Kansans conference, which featured national, state and local speakers and provided a forum to discuss chronic diseases and injuries and how to prevent them.

Looking Ahead

Throughout 2009, our nation has faced difficult economic times and Kansas has not been immune to these hardships. We ended the year knowing that reductions will be needed in the current State Fiscal Year (SFY) 2010 budget and that the projections for the SFY 2011 budget could be even worse. There will be difficult decisions to make as the services that KDHE programs provide are important to Kansans and any reductions will affect the people we serve.

As we begin 2010, let's join together and continue working collaboratively to promote a cleaner, healthier and safer Kansas for ourselves and for our children.

Be well,



Roderick L. Bremby
Secretary,
Kansas Department of
Health and Environment



THE KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT

Our Vision

Healthy Kansans living in safe and sustainable environments

Our Mission

To protect the health and environment of all Kansans by promoting responsible choices

Our Values

Leadership—Embracing responsibility, leading by example, and valuing innovation and creativity without regard to position or title

Accountability—Assuming ownership of our individual and collective roles in tending to our state's health and environmental issues

Communication—Encouraging staff, partners, and the public to listen to one another and share information about issues and accomplishments

Integrity—Upholding the highest professional and personal standards to promote a sense of pride and honor in our work

Teamwork—Collaborating with and valuing the contributions and perspectives of staff, partners and the public to improve programs and services

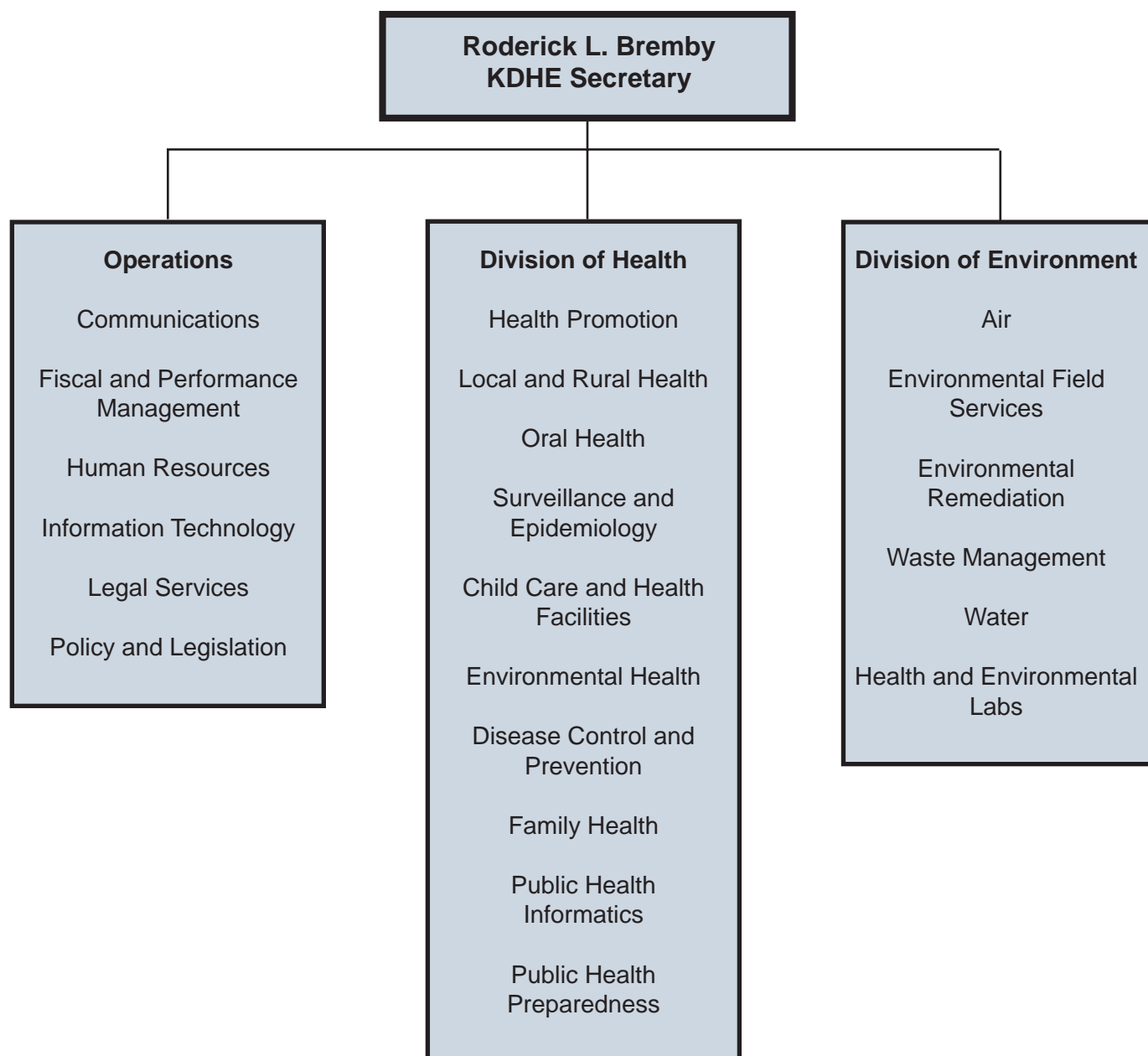
EXCELLENCE IN SERVICE (EIS)

KDHE continues to be actively engaged in strategic planning using the KDHE Strategic Plan, titled Excellence In Service, or EIS. EIS uses the Balanced Scorecard approach to strategic planning and translates mission into actions and actions into outcomes. The KDHE strategy focuses on creating a vibrant, stable and respected organization that can respond, anticipate and provide leadership on public health and environment issues for customers.

In 2009, the EIS team discussed how to make KDHE ready for proposed public health credentialing requirements and how to integrate that into the daily activities of the staff. This would be an extension of the balanced scorecard approach to planning and evaluating programs and their meeting the needs of the citizens of Kansas. The EIS team is also looking at means to help with the new employee management program to make sure that the underlying purpose of creating equitable evaluations throughout the agency and state can be achieved within the strategic planning process and balanced scorecard process. EIS emphasizes high ethical standards for all employees of the agency and seeks to develop a common sense of purpose and pride throughout the organization, so that each person works toward achievement of shared agency goals.

THE KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT

KDHE is organized into two divisions and one administrative section. A summary of the activities each division performs is outlined below in the organizational chart.



THE KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT

The divisions of the Kansas Department of Health and Environment are responsible for the activities listed below.

The **Division of Health** is responsible for:

- Licensing and regulating a variety of day cares, preschools, foster homes, residential centers, hospitals and treatment facilities.
- Credentialing health care workers.
- Investigating disease outbreaks and helping to prevent the spread of disease by promoting healthy behaviors and immunizations.
- Educating the public about chronic diseases and injury prevention.
- Assisting Kansas communities in establishing systems to provide public health, primary care and prevention services.
- Addressing the special needs of children through infant screening programs, nutrition programs and services for children with special health needs.
- Managing the civil registration system for the state by collecting and processing records on births, deaths, marriages and divorces, and providing reliable statistics to policymakers, program managers and the public.

The **Division of Environment** is responsible for:

- Conducting regulatory programs for public water supplies, industrial discharges, wastewater treatment systems, solid waste landfills, hazardous waste, air emissions, radioactive materials, asbestos removal, refined petroleum storage tanks and others.
- Administering programs to remediate contamination and evaluate environmental conditions across the state.
- Ensuring compliance with federal and state environmental laws.
- Working with the Environmental Protection Agency (EPA) to preserve the state's natural resources.
- Providing laboratory data in support of public health and certifying the quality of Kansas laboratories.
- Providing scientific analysis to help diagnose and prevent diseases.
- Providing laboratory test results to help guard public drinking water, ambient air and surface/groundwater quality.

2009 LEGISLATIVE SUMMARY

Pharmacy Act - Senate Bill 16 amends existing law to clarify that the donation, acceptance, transfer, distribution or dispensing of any drug in compliance with the provisions of the Cancer Drug Repository Program and the Utilization of Unused Medications Act do not constitute a violation of the Pharmacy Act of the State of Kansas.

Amendments to the Quarantine and Isolation Statutes - Originally introduced as SB 154, then amended into SB 44, this bill amends current law on summary proceedings (KSA 65-1605) in a habeas corpus action to: allow the judge to appoint one instead of the original two competent physicians to make an examination of the person restrained because of an alleged infection or communicable disease; and change “shall” to “may” (i.e., a judge “may” appoint at least one competent physician).

Repeal Lead Sunset Provision - SB 82 eliminates the sunset provision from statute to allow the Kansas Healthy Homes and Lead Hazard Prevention Program to continue. Existing federal grants are in place to continue the program past 2010.

Expand Automatic External Defibrillator (AED) Legislation - SB 102 deletes the definition and requirement that only a “qualified person” may use an automated external defibrillator (AED). Any person using an AED in good faith to render emergency care or treatment would be held harmless from any civil damages as a result of such care or treatment. Removal of the “qualified person” definition also permits a person or entity that provides an AED for use by others to allow any person to use the defibrillator.

Repeal Waste Tire Recycling Sunset Provision - Originally introduced as HB 2080, then amended into Senate Sub for HB 2085, this bill eliminates the sunset provision from statute to allow the Waste Tire Recycling Grant Program to continue. This program directs KDHE to award grants to local units of government pay up to 50 percent of the cost to purchase products made from recycled waste tires including items such as playground cover, picnic tables, park benches and athletic field surfacing.

Women’s Right to Know Act - Originally introduced as HB 2076, then amended into House Sub for SB 238, this bill makes several changes to the Woman’s Right to Know Act, which requires certain information to be provided to a woman in order for a physician to obtain voluntary and informed consent prior to performing an abortion. Physicians would be required to meet with each woman at least 30 minutes prior to an abortion to answer questions and provide information about the abortion as well as offer an ultrasound, a picture of the ultrasound and an opportunity to hear the unborn child’s heartbeat. The bill also directs KDHE to create a video containing all of the information described above in both English and Spanish.

Graduated Driver’s License - HB 2143 modifies the requirements for driving permits and drivers’ licenses for drivers younger than 17 years old. A first-time applicant for full licensure would have to be at least 17 years old (changed from age 16). A farm permit would be available from age 14 until age 17 (changed from age 16). An applicant for a restricted license must have held an instruction permit for at least one year (changed from six months). If the applicant is younger than 16, the applicant must have completed driver’s education. The bill would ban those with instruction permits, farm permits, or restricted licenses from operating wireless communication devices while driving.

Swine Waste and Nutrient Utilization Plans - Originally introduced as SB 316 and HB 2121, then amended into HB 2295, this bill shifts responsibility for review of swine nutrient utilization plans from the Kansas Department of Agriculture to KDHE.

2009 LEGISLATIVE SUMMARY

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Energy Bill - Originally introduced as HB 2173 and SB 339, then amended into Senate Sub for HB 2369, this bill enacts new law and amends existing law related to energy. Among many other elements, the bill enacts the Renewable Energy Standards Act; the Compressed Air Energy Storage Act; the Net Metering and Easy Connection Act; and new law regarding fuel efficiency for state-owned motor vehicles and energy efficiency of state-owned and leased space and equipment.

Specifically relevant to KDHE, the bill amends the Kansas Air Quality Act to prohibit the Secretary of KDHE from promulgating rules and regulations that are more stringent than required by the federal Clean Air Act or rules and regulations authorized by that Act, unless authorized by the legislature to do so. The restriction in the bill does not apply to a plan for a nonattainment area under the federal Clean Air Act.

The bill also prohibits rules and regulations under the State Act from being enforced in any area of the state prior to the time KSA 65-3012 is amended to establish a procedure for addressing air pollution emissions that pose an imminent and substantial danger to public health or welfare or to the environment.

The bill requires the Secretary of KDHE to comply with the settlement reached between Sunflower Electric Power Corporation and the State.

H1N1

The response to the worldwide outbreak of the 2009 H1N1 influenza A virus marks the first time in history that the public health community has attempted to mitigate the effects of an influenza pandemic.

On Saturday, April 25, 2009, KDHE announced that Kansas had become the third U.S. state (after Texas and California) to confirm cases of H1N1. Two cases of H1N1 flu had been confirmed in Dickinson County. At about 2 a.m. that morning, the Kansas Health and Environmental Laboratories had reported preliminary, positive results for influenza A – a strong indication that the cases involved the 2009 H1N1 virus. By 3 a.m., KDHE had notified the Dickinson County Health Department of these preliminary results. The health department then notified the attending physician. KDHE obtained the use of the state executive aircraft so that a KDHE staff member could accompany the specimens to Atlanta, where the CDC laboratories would confirm the preliminary results.

The leadership of KDHE has engaged directly with local health departments, hospitals, vaccine providers and other agencies to coordinate response efforts. Over the weeks and months that followed, KDHE began disease surveillance for H1N1 and other influenza-like illness. Epidemiology and laboratory staff worked many hours to identify cases and characterize the public health impact of H1N1. Preparedness staff managed the distribution of antiviral medications and personal protective equipment to hospitals, pharmacies and other entities. Health educators drafted and distributed guidance for daycare facilities, K-12 schools, universities, businesses, community organizations and families to protect health by reducing the risk of H1N1 being spread at those locations. All of the guidance and educational materials were posted on the H1N1 web site that KDHE staff created, and regularly updated, to help keep the public informed. Web pages with H1N1 information were the most visited pages for much of 2009, and the agency's web site received almost two million visitors in 2009, a 23 percent increase over 2008.



Many KDHE staff members have assisted in the agency's H1N1 response efforts. As of late December 2009, more than 50 volunteer staff had answered nearly 1,800 phone calls and 1,500 e-mails from the public, and roughly 35 others helped to distribute anti-viral medications to almost every Kansas county. Notably, staff members from the Office of Surveillance of Epidemiology co-authored an article published in The New England Journal of Medicine on May 7 titled, "Emergence of a Novel Swine-Origin Influenza A (H1N1) Virus in Humans." KDHE coordinated a statewide summit on August 24 regarding H1N1 that involved about 795 attendees, which included elected officials, public health professionals, educators, first responders, emergency managers and business leaders.

When a vaccine became available to states from the federal government on October 1, the Kansas Immunization Program launched the most sweeping vaccination campaign in the state's history. The program has registered many hundreds of vaccine providers across the state and coordinated orders for vaccine from those providers, overseeing the delivery of more vaccine doses in a week than in a normal, seven-month flu season. Kansas has taken a population/risk based-approach, to assure that vaccine supplies are accessible throughout the state and people at the greatest risk are vaccinated earliest. The campaign has been supported by educational advertising and public information efforts to encourage vaccination.

The 2009 H1N1 pandemic virus is one that can cause waves of flu-related illness at any time of year, unlike seasonal flu viruses. Consequently, the vaccination campaign and the overall Kansas response to H1N1 is expected to continue well into 2010, until the overall susceptibility of the state's population to the virus has been substantially decreased.

HEALTH INFORMATION EXCHANGE

In 2009, the Kansas Department of Health and Environment (KDHE) became the state's designee for health information exchange. Every state will receive funding from the U.S. Department of Health and Human Services to help achieve the national goal of every American having an electronic health record by 2014. Kansas submitted its grant application to the Office of the National Coordinator for Health Information Technology (ONC) in October. Kansas expects to receive \$9 million for the four-year project. The initial work will be to develop and submit for approval strategic and operational plans to ONC. Upon acceptance of those plans, the ONC will release funds to implement plans to create a statewide health information exchange that achieves meaningful use of the technology.

The primary goal of health information exchange is to allow healthcare providers and stakeholders to share data for coordinating patient care and to support public entities in understanding and improving health goals for the entire population.

To guide the planning and implementation process, KDHE convened an expanded e-Health Advisory Council (eHAC), which is a broad base of health care stakeholders representing more than 30 health care organizations. This group divided into workgroups in 2009 and focused on five areas of the project: governance, technology, business operations, finance and legal. In January 2010, the eHAC will begin consolidating the efforts of the workgroups into a strategic plan for Kansas. Meetings are open to the public.

Operational planning for the health information exchange is expected to begin in January and occur throughout 2010, with implementation of the exchange set to begin following the planning.

In an effort to educate the public and stakeholders, public meetings were held in December 2009 throughout the state to explain health information exchange. More meetings will be scheduled for additional sites in 2010.

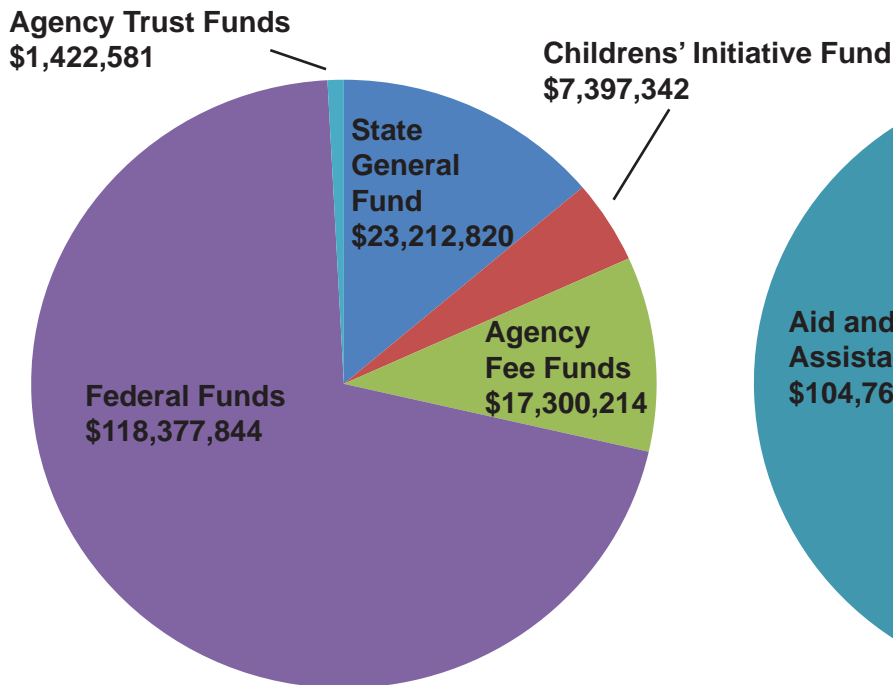
Additionally, a web site was developed to keep stakeholders and the public informed of developments. The site, www.kanhit.org, went live in October 2009 and has received more than 20,000 hits.



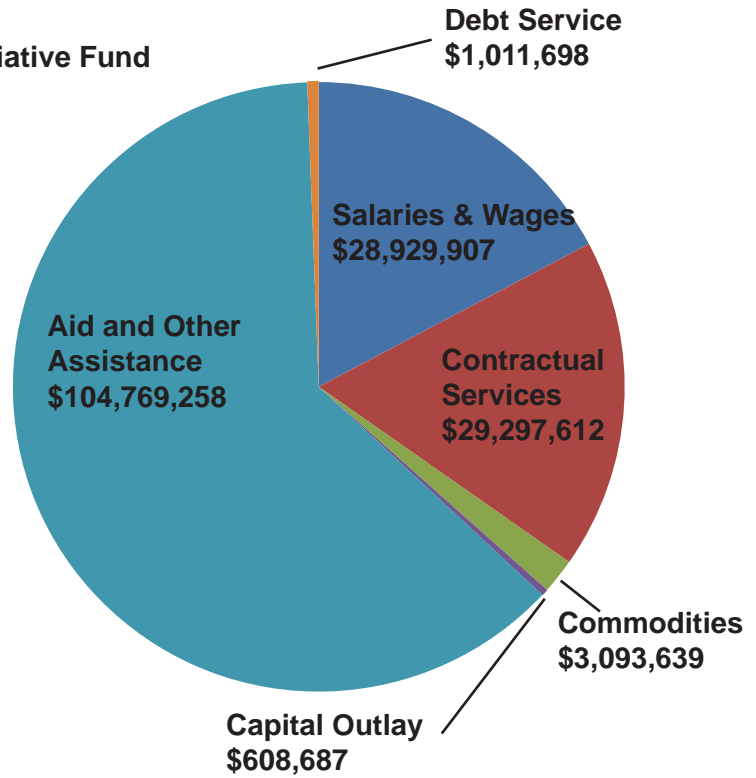
The screenshot displays the KanHIT website interface. At the top, a banner features the text "Kansas Health Information Technology Initiative" in a stylized font, accompanied by a globe graphic and the URL "www.kanhit.org". Below the banner, a sidebar on the left lists navigation links: "KanHIT Home Page", "e-Health Advisory", "Meeting Information", "e-Health News", "Links", "Reference Documents", "Regional Center Information", "Privacy and Access", "Timelines", and "Multimedia". The main content area is titled "Welcome to the KanHIT Website" and includes a section for the "December Stakeholders' Meeting Presentation". This section contains a photograph of a stethoscope and a woman using a laptop, along with descriptive text about the project's goals and outcomes. The footer of the page includes the KDHE logo and the text "© Kansas Department of Health & Environment: www.kdheks.gov - Disclaimer - Webmaster".

FISCAL YEAR 2009 BUDGET*

FY 2009 Health Funding by Source

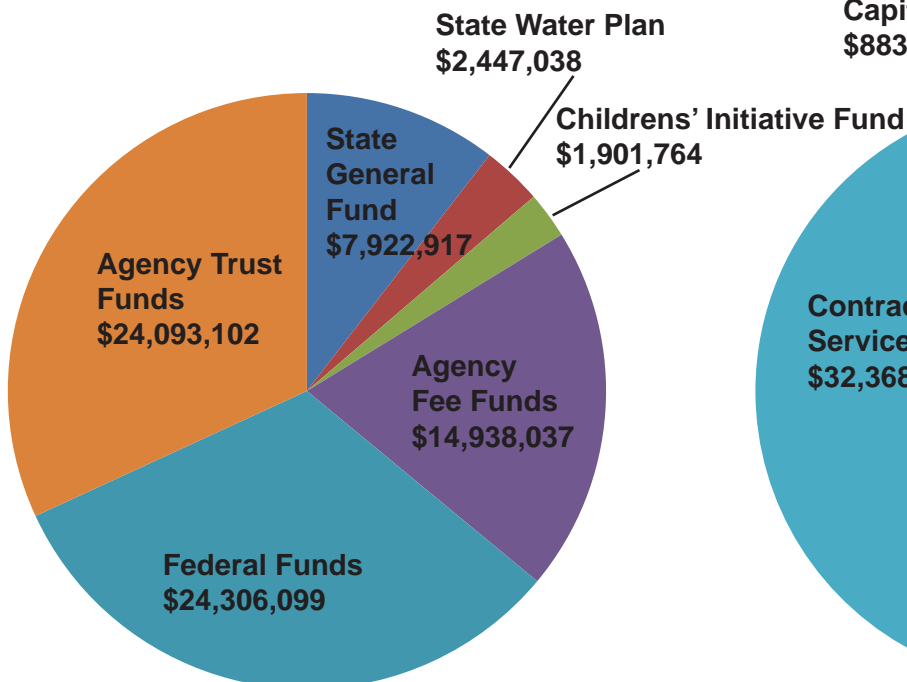


FY 2009 Health Expenditures by Type

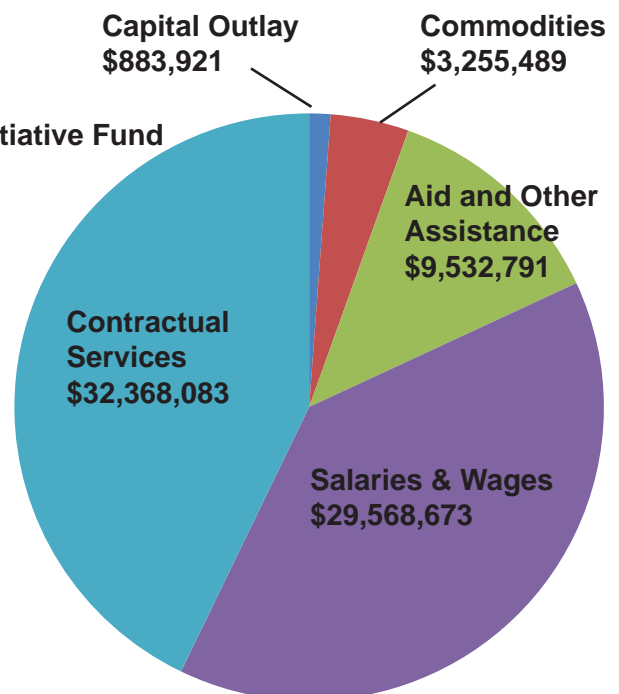


Health Total: \$167,710,801

FY 2009 Environment Funding by Source



FY 2009 Environment Expenditures by Type



Environment Total: \$75,608,957

*FY 2010 Budget Includes Governor's July 2009 and November 2009 allotments to SGF and December 2009 allotment to SWP

DIVISION OF HEALTH

The Division of Health exists to protect and improve the health of every Kansan. It does this in most cases not by dealing directly with individuals, but with populations. Unlike practitioners of clinical medicine, the public health professionals working in the Division of Health focus their attention less on the health of patients and more on the health of society. The emphasis is less on cure and more on prevention; less on treatment after the fact and more on preserving health before it is lost. Specifically, the division's mission is to strengthen the state's overall public health system so that conditions that support optimal health can be maintained and enhanced in every community in the state.

By applying the science of epidemiology, the division's public health professionals seek better understanding of the causes of poor health while working to develop feasible program and policy solutions. Health problems that garner the most attention are those having both a large impact in terms of morbidity and mortality, and those with the greatest potential for prevention. Solutions most often sought for each major health concern are those that address the underlying root causes, scientifically sound interventions that make it easier for people to make healthy choices and take better care of themselves and their children, regardless of their income or access to medical services. In this way, the Division of Health carries forward the reforming work of the state's public health pioneers who a century ago understood that the most lasting improvements in community health result not from expanding medical treatment facilities, but from creating a healthier context in which all Kansans live, work and play every day of their lives.

The ongoing preventive activities of the Division of Health include such things as: reducing the risk of catching communicable diseases through immunization and contact tracing, lowering the probability that children will become obese or start to smoke cigarettes through school-based prevention programs, redesigning communities to encourage more physical activity, improving birth outcomes for families beset by poverty, poor housing and lack of opportunity, making certain that childcare settings and healthcare facilities are safe, assuring that lead and other toxic hazards are cleaned up in the home environment, coordinating public health disaster preparedness activities statewide, promoting better access to primary medical and dental care, and inserting health objectives into policy development in every sector of society.

Specifically, the Division of Health is responsible for:

- Licensing and regulating a variety of day cares, preschools, foster homes, residential centers, hospitals and treatment facilities.
- Credentialing certain health care workers.
- Improving the oral health of the population.
- Conducting surveillance for reportable conditions, investigating disease outbreaks, and helping to prevent the spread of communicable disease by promoting screening, responsible behavior and immunizations.
- Developing policies and programs that address preventable chronic diseases and injuries.
- Assisting Kansas communities in establishing systems to provide public health, primary care and prevention services.
- Protecting the public from such hazards as lead, asbestos and radiation.
- Addressing the special needs of children through infant screening programs, nutrition programs and services for children with special health needs.

DIVISION OF HEALTH

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- Providing leadership to mitigate, prepare for, respond to and recover from disasters, infectious disease outbreaks, terrorism and mass casualty emergencies.
- Managing the civil registration system for the state by collecting and processing records on births, deaths, marriages and divorces, and providing reliable statistics to policymakers, program managers and the public.

HEALTHY KANSANS 2010

Healthy Kansans 2010 is the corollary to Healthy People 2010. This initiative provides a preventive health framework for Kansas' health providers, organizations, communities and the state to encourage and provide opportunities for improving health outcomes in Kansas. Healthy Kansans 2010 utilizes a set of recommendations developed through an extensive planning process with input from more than 150 community representatives, health experts and academics from across Kansas. The plan was developed around three cross-cutting priority health issues: reducing and eliminating health disparities, social determinants of health, and early disease prevention and intervention for women, children and adolescents.

KDHE continues to integrate the Healthy Kansans 2010 recommendations into planning and prevention efforts and encourages the inclusion of these recommendations in the work of its many Kansas partners. The recommendations developed through the Healthy Kansans 2010 initiative were constructed around the 10 Leading Health Indicators as identified by the Healthy People 2010 Objectives for the Nation published by the Centers for Disease Control and Prevention (CDC). These indicators are used as markers of progress to the desired state of health for Kansas. While not all KDHE Division of Health programs link directly to Healthy Kansas 2010 goals, there are areas in which progress can be measured.

KANSANS PERFORMANCE ON 10 LEADING HEALTH INDICATORS FOR THE HEALTHY PEOPLE 2010

★ Target Met ■ Improving ▲ Steady ● Declining

		Kansas Data (Baseline)	Kansas Data (Most Current)	HP2010 Goal
Physical Activity				
■	Increase the proportion of adolescents who engage in vigorous physical activity that promotes cardio-respiratory fitness 3 or more days per week for 20 or more minutes per occasion.	63% (2002 KS Youth Tobacco Survey, grades 9-12)	70%* (2005 KS Youth Risk Behavior Surveillance System, grades 9-12)	85% (grades 9-12)
●	Increase the proportion of adults who engage regularly, preferably daily, in moderate physical activity for at least 30 minutes per day.	38% (2003 KS BRFSS)	35% (2008 KS BRFSS)	50%
Overweight and Obesity				
▲	Reduce the proportion of children and adolescents who are overweight or obese. (>= 95 th percentile)	11% (ages 12-18, 2002 KS Youth Tobacco Survey, grades 6-12)	12% (2009 KS Youth Risk Behavior Surveillance Survey, grades 9-12)	5% (ages 12-19)
●	Reduce the proportion of adults who are obese.	23% (2004 KS BRFSS)	28% (2008 KS BRFSS)	15%
Tobacco Use				
■	Reduce cigarette smoking by adolescents.	21% (2002 KS Youth Tobacco Survey, grades 9-12)	17% (2009 KS Youth Risk Behavior Surveillance Survey, grades 9-12)	16% (grades 9-12)
■	Reduce cigarette smoking by adults.	20% (2004 KS BRFSS)	18% (2008 KS BRFSS)	12%

HEALTHY KANSANS 2010

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★ Target Met ■ Improving ▲ Steady ● Declining

		Kansas Data (Baseline)	Kansas Data (Most Current)	HP2010 Goal
Substance Abuse				
<div>■</div> <div>★</div>	Increase the proportion of adolescents <i>not</i> using alcohol or any illicit drugs during the past 30 days.	68% (6 th , 8 th , 10 th , and 12 th graders <i>not</i> using alcohol at least once in the past 30 days)	73% (6 th , 8 th , 10 th , and 12 th graders <i>not</i> using alcohol at least once in the past 30 days)	89%
		90% (6 th , 8 th , 10 th , and 12 th graders <i>not</i> using marijuana at least once in the past 30 days) (2004 Kansas Communities That Care Survey)	92% (6 th , 8 th , 10 th , and 12 th graders <i>not</i> using marijuana at least once in the past 30 days) (2009 Kansas Communities That Care Survey)	89%
▲	Reduce the proportion of adults engaging in binge drinking of alcoholic beverages during the past month.	13% (2004 KS BRFSS)	14% (2008 KS BRFSS)	6%
Responsible Sexual Behavior				
●	Increase the proportion of adolescents who abstain from sexual intercourse.	55% (Abstinence only - 2005 KS Youth Risk Behavior Surveillance System, grades 9-12)	53% (Abstinence only - 2009 KS Youth Risk Behavior Surveillance System, grades 9-12)	95% (includes abstinence or condom use if sexually active)
Mental Health				
	Increase the proportion of adults with recognized depression who receive treatment.	No Kansas data available that is directly comparable to HP2010 target.	42% (2008 KS BRFSS)	64%
Injury and Violence				
■	Reduce deaths caused by motor vehicle crashes.	17.1 deaths per 100,000 population (2003 Vital Statistics, KDHE)	14.8 deaths per 100,000 population (2008 Vital Statistics, KDHE)	9.2 deaths per 100,000 population
▲	Reduce homicides.	4.3 homicides per 100,000 population (2003 KS Vital Statistics)	4.0 homicides per 100,000 population (2008 KS Vital Statistics)	3.0 homicides per 100,000 population

HEALTHY KANSANS 2010

...continued

 Target Met
  Improving
  Steady
  Declining

		Kansas Data (Baseline)	Kansas Data (Most Current)	HP2010 Goal
Environmental Quality				
	Reduce the proportion of persons exposed to air that does not meet the U.S. Environmental Protection Agency's health-based standards for ozone.	0% (EPA Aerometric Information Retrieval System)	0% (EPA Aerometric Information Retrieval System)	0%
Immunization				
	Increase the proportion of young children who are fully immunized (4:3:1:3:3 series)	77.5% (4:3:1:3:3 series - 2004 National Immunization Survey)	78.2% (4:3:1:3:3 series - 2008 National Immunization Survey)	80% (4:3:1:3:3 series)
	Increase the proportion of non-institutionalized adults aged 65 years and older who are vaccinated annually against influenza.	68% (2004 KS BRFSS)	72% (2008 KS BRFSS)	90%
	Increase the proportion of adults aged 65 years and older ever vaccinated against pneumococcal disease.	63% (2004 KS BRFSS)	67% (2008 KS BRFSS)	90%
Access to Health Care				
	Increase the proportion of persons with health insurance.	85% (2004 KS BRFSS)	88% (2008 KS BRFSS)	100%
	Increase the proportion of persons who have a specific source of ongoing primary care.	84% (2004 KS BRFSS)	85% (2008 KS BRFSS)	96%
	Increase the proportion of pregnant women who begin prenatal care in the first trimester of pregnancy.	88% (2003 Vital Statistics, KDHE)	73.1% (2008 Vital Statistics, KDHE)	90%

* 49% of Kansas students (grades 9-12) were physically active for at least 60 minutes per day for five or more of the past seven days (2009 YRBS).

BUREAU OF HEALTH PROMOTION

The mission of the Bureau of Health Promotion is to improve quality of life and reduce the incidence of death and disability from chronic disease and injury, which supports KDHE's mission of protecting the health and environment of all Kansans by promoting responsible choices. The office is responsible for the core public health functions related to reducing the preventable burden of chronic diseases and injuries. Program activities are supported by state, federal and private grant funds, which have been obtained through competitive processes and through collaboration with partner organizations to leverage funds from existing resources.

PROGRAMS/SECTIONS

Kansas is one of 12 states funded to evaluate the utility of the Healthy People 2020 framework. This evaluation project is designed to identify Kansas health priorities through a highly participatory strategic planning process, emphasizing multi-sector collaboration and new technology for consensus building. KDHE and its partners will develop recommendations for systems changes that result in a more integrated approach to address health determinants and disease/conditions. This project, combined with the recommendations developed through the highly successful **Healthy Kansans 2010** process, will lay a firm foundation on which to build Healthy Kansans 2020.

The goal of the **Kansas Arthritis Program (KAP)** is to reduce the burden of arthritis in Kansas by increasing awareness of the impact of arthritis and the importance of early diagnosis and self-management to reduce disability, and increasing the number of evidence-based self-management programs throughout the state.

The **Cancer Program** facilitates development of the Kansas Cancer Plan. Efforts to update the plan are underway, with a release date in March 2010. The plan outlines strategies to improve prevention, screening and early detection; assure quality treatment and pain management; and assess survivorship and end-of-life care. It also provides breast and cervical cancer screening and diagnostic services to uninsured women who meet certain income and age (40-64) guidelines. Between July 1, 2008 and June 30, 2009, the program screened 5,800 women, the maximum number of eligible women that the current, funding would support.

The efforts of the **Heart Disease and Stroke Prevention program** involve interventions at the community and provider level through public and professional education. Efforts focus on stroke recognition and treatment as well as heart disease prevention and management; signs and symptoms of heart attack and stroke and the importance of calling 9-1-1.

Chronic Disease Risk Reduction Grants provide financial and technical assistance to communities to address proper nutrition, physical activity and tobacco use prevention, in order to prevent chronic disease.

The goal of the **Kansas Diabetes Prevention and Control Program (DPCP)** is to reduce the burden of diabetes in Kansas through a multidimensional approach to diabetes control. This approach includes primary prevention, quality of care, patient self-management, and systems and community change activities. The Kansas DPCP convenes stakeholders to assure a coordinated state diabetes public health system, and to identify the roles the Kansas DPCP and partners will play in that system.

The **Injury Prevention Program** facilitates a statewide planning process related to the prevention and control of injuries and to strengthen injury surveillance programs. The program facilitates the activities of the Safe Kids Kansas Coalition, fire and burn prevention program and youth fire-setter intervention services. Since the program began, 25,680 child safety seats, booster seats and special needs child seats have been distributed to low-income families. In addition, more than 113,000 bicycle helmets have been distributed and 20,000 home smoke detectors installed. The program also conducts suicide prevention activities and provides funding and technical assistance to communities to support rape prevention education.

BUREAU OF HEALTH PROMOTION

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Kansas Coordinated School Health (KCSH) is a collaborative project between KDHE and the Kansas State Department of Education to integrate chronic disease prevention strategies into the school setting by utilizing the Coordinated School Health Model. Specific risk factors addressed include physical inactivity, nutrition, tobacco use and obesity.

The **Physical Activity and Nutrition (PAN) Program** is dedicated to increasing the number of Kansas residents who have the knowledge, motivation and opportunity to make lifestyle choices that promote healthy eating and increased physical activity through state level leadership and coordination that reaches into communities across the state.

The **Health Risk Behavior Surveillance** program conducts a continuous, confidential, population-based survey of Kansas adults through the Behavioral Risk Factor Survey System (BRFSS) to estimate the prevalence of health risk behaviors, utilization of preventive health practices, and knowledge of health risks among the population. Youth surveys are also conducted to estimate the prevalence of tobacco use among middle and high school students, and the prevalence of risk for overweight among Kansas children in grades 6-12.

The **Tobacco Use Prevention Program (TUPP)** is committed to improving the health and lives of all Kansans by reducing use of and exposure to tobacco. The program works in concert with state and local partners to promote interventions that are consistent with the CDC's Best Practices for Tobacco Use Prevention recommendations for action. Communities across Kansas receive limited funding to support actions aimed at eliminating exposure to secondhand smoke, promoting tobacco cessation among youth and adults, preventing initiation of tobacco use among youth, and identifying and eliminating tobacco use disparities. The toll-free Kansas Tobacco Quitline of 1-800-QUIT-NOW (784-8669) is available 24 hours a day, seven days a week to provide individual counseling, information and resources for tobacco cessation.

The **Kansas Disability and Health Program** is designed to develop, sustain and support activities to improve the health and quality of life for people with disabilities. This includes building the capacity of communities to address violence against individuals with disabilities through the creation of multi-disciplinary teams.

2009 ACCOMPLISHMENTS

- Clean Indoor Air continues to gain footing in Kansas with a number of communities and counties passing ordinances in 2009, including the cities of Pratt, McPherson, Emporia, Topeka and Pratt County. Additionally, Salina strengthened their ordinance. Kansas now has a total of 38 communities and counties with Clean Indoor Air Ordinances.
- The Kansas Cancer Registry, contracted with the University of Kansas, once again received a Gold Standard rating for completeness of data. The efforts of the registry, together with the cooperation of laboratories, hospitals and other reporting facilities, means that Kansans are informed about the incidence of cancer in the state and can be assured that the data collected is complete, accurate and confidential. The Gold Standard award is presented by the North American Association of Central Cancer Registries.
- In 2009, the Kansas Behavior Risk Factor Surveillance System (BRFSS) program expanded its sample size from 8,000 to 16,000 respondents to provide local level data in addition to state-level estimates.

Contact Information

Bureau of Health Promotion

Phone: 785-296-8916

Web site: www.kdheks.gov/bhp

BUREAU OF LOCAL AND RURAL HEALTH

The Bureau of Local and Rural Health, in collaboration with a diverse array of public and private partners, helps Kansas communities enhance their public health and health care delivery systems. The office's mission is to assist community-driven efforts to ensure access to quality public health, primary care and prevention services. The office has three primary goals:

- To ensure Kansas achieves the highest standards of health, by promoting core public health functions and philosophy.
- To support health policy that is consumer- and community-driven.
- To help all Kansas communities succeed by preserving consumer-oriented, integrated systems of care.

PROGRAMS/SECTIONS

The **Local Health Section** supports public health workforce development, public health performance standards and accreditation, and quality improvement processes. Two major goals are emphasized: increasing the capacity of public health agencies to perform essential public health services, and enhancing the ability of the public health workforce to achieve core competencies for public health. These goals are accomplished through provision of technical assistance to local health departments and other public health system partners, along with promotion of comprehensive public health education and training for the public health workforce.

The mission of the **State Office of Rural Health** is to promote access to quality health care in rural Kansas by linking rural communities with state and federal resources aimed at developing long-term solutions to rural health challenges. The Office provides an array of services to meet its mission of encouraging recruitment and retention of health professionals, disseminating information, coordinating state rural health activities, strengthening partnerships and providing technical assistance to rural communities. The Office administers the Small Hospital Improvement Program (SHIP) grant and the Medicare Rural Hospital Flexibility (FLEX) program, both of which support the state's small rural hospitals and rural health networks.

The mission of the **Primary Care Office** is to assure that vulnerable, low-income, uninsured, and otherwise underserved Kansas residents receive adequate access to affordable primary health care services. The Primary Care Office focuses on helping local communities through planning, data assistance, specific program services, and technical consultation. Activities include evaluating access for underserved populations including persons covered by state medical assistance programs such as HealthWave and Medicaid, and using these analyses to apply for appropriate federal shortage designations; supporting activities to recruit and retain health professionals through the J-1 Visa Waiver Review Program, National Health Service Corps Loan Repayment Program, and State Loan Repayment Programs; administering a program of state grants to support "safety net" primary care clinics; directing the Charitable Health Care Provider Program; and collaborating with the State Board of Pharmacy in the administration and activities of the Unused Medications Program.

The **Kansas Trauma Program** is a partnership between public and private organizations to address the treatment and survival of patients with critical injuries. The program's goal is to establish local and regional trauma systems across the state so that each patient is properly triaged and transported to the hospital with the most appropriate resources as quickly as possible. Because patients with severe injuries require rapid, specialized treatment to ensure the best chance for recovery, an integrated trauma system increases their chances for survival and reduces their chance of permanent disability. Activities of the Trauma Program include implementation of a statewide trauma plan; development of regional trauma plans; management of a statewide data collection system on trauma; designation of trauma centers; and support for the Advisory Council on Trauma and Regional Trauma Councils.

BUREAU OF LOCAL AND RURAL HEALTH

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The purpose of the **Kansas Statewide Farmworker Health Program** is to assure access to primary health care services for low-income and medically underserved migratory and seasonal farmworkers through health service vouchers and case management services.

The **Refugee Health Program** coordinates health screening for Refugees who are resettled in the state. Health information from the U.S. Public Health Service Quarantine stations are sent to local health departments who conduct screenings in order to: 1) ensure follow-up evaluation, treatment and referral of conditions identified during the medical examination; 2) identify persons with communicable diseases of potential public health importance; and 3) identify personal health conditions that adversely impact effective resettlement and personal well-being (e.g., job placement, language, training, or attending school, etc.).

2009 ACCOMPLISHMENTS

- More than 8,000 new “learners” registered for KS-TRAIN and more than 16,000 courses were completed by those with KS-TRAIN accounts. In a year characterized by tight budgets, KS-TRAIN served as a cost-effective alternative to the classroom, enabling public health professionals to access quality education from their desktop.
- Since the program’s inception on June 1, 2009, more than \$1.1 million dollars worth of medications were distributed to uninsured, low-income Kansans through the Unused Medications Clearinghouse.
- The number of clinics that serve anyone, regardless of ability to pay, grew to 39, with 70 sites in 32 counties of the state. Seventy-five percent of all Kansans -- and 73 percent of uninsured Kansans -- live in a county with a state-funded primary-care (safety-net) clinic. Two more of these clinics were also successful in gaining Federally Qualified Health Center (FQHC) status. The state’s FQHCs now receive \$10.5 million dollars annually in federal grant funding to provide care to underserved populations (in 2009 they also received additional Recovery Act funding of \$12.3 million).
- Through the provision of loan repayment to health professionals who commit to practice in a federally-designated underserved community, there were 47 National Health Service Corps (NHSC) providers serving in 25 counties, and seven providers receiving State Loan Repayment (SLR) in six counties throughout Kansas in 2009. In 2009, the Primary Care Office (PCO) was awarded funding from the federal government to double the number of annual SLR awards in the coming year. The PCO will also work collaboratively with the federal government to double the number of NHSC providers serving underserved areas in Kansas and throughout the country.
- The State Farmworker Health Program helped more than 4,300 farmworkers and dependents receive primary care and dental services, an eight percent increase over 2008.
- The State Farmworker Health Program introduced new programs aimed at improved self-management of chronic disease, for which it was awarded the Sister Cecila B. Abhold award, one of three such awards given out annually across the nation for innovative practices in outreach and services to farmworkers.
- Refugee Program staff worked with KDHE communications staff to ensure H1N1 educational materials were available in the primary languages of refugee populations settling in Kansas.
- With support from the state trauma program and the office of rural health, the state’s six trauma regions provided specialized trauma care training to 502 healthcare professionals statewide.
- With support from the state trauma program, five hospitals in Kansas were designated or re-designated as trauma centers.

Contact Information

Bureau of Local and Rural Health

Phone: 785-296-1200

Web site: www.kdheks.gov/olrh

BUREAU OF ORAL HEALTH

The Bureau of Oral Health works to increase public awareness about the impact of dental disease and to improve the oral health of all Kansans through oral health data collection and dissemination, statewide oral health education, the development of evidence-based oral health policy and statewide programs dedicated to dental disease prevention.

Some of the Bureau's current projects include dental professional workforce assessment, educational programs about disease identification and prevention, a comprehensive project to improve the oral health of children with special health care needs, and oral health screenings for all Kansas school children K-12.

2009 ACCOMPLISHMENTS

- The School Oral Health Screening program completed its first year. Two-hundred volunteer dental professionals provided oral health screenings to more than 55,000 children in 52 Kansas counties. Data from this program is available at: www.kdheks.gov/ohi/screening_program.htm.
- In September, the Bureau of Oral Health completed the 2009 Oral Health Workforce Assessment, a comprehensive survey of Kansas dentists and dental hygienists with Extended Care Permits. Five community focus groups were held and a DVD was produced capturing regional opinions about the sufficiency of the oral health workforce. The Bureau was awarded an additional three year Health Resources and Services Administration (HRSA) grant to develop a Dental Recruitment program in 2010.
- In collaboration with Oral Health Kansas and GraceMed Clinic in Wichita, the Bureau directs a program to improve oral health access for children with special health care needs. In year two, regional parent-educator dental hygienists provided 169 educational presentations to more than 1,200 Kansas parents and caregivers. GraceMed Dental Clinic held clinic days where special needs patients could receive care. In year two, 16 clinic days were held, helping 49 patients with special needs that had extensive dental disease and required sedation to receive dental services.
- In addition to these major projects, the Bureau also supports school sealant programs in Emporia and Pittsburg, collaborates with the Kansas Health Policy Authority on dental issues targeting the Medicaid population, provides medical providers with oral health materials and fluoride varnish education, and provides guidance to other KDHE bureaus and community partners on oral health issues.

Contact Information
Bureau of Oral Health
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BUREAU OF SURVEILLANCE AND EPIDEMIOLOGY

The Bureau of Surveillance and Epidemiology (BSE) is responsible for programs designed to prevent and control communicable diseases that are crucial public health concerns. BSE also provides epidemiologic guidance and support for environmental health, the Kansas Trauma Program and other programs.

Its primary functions are: 1) administer the state reportable infectious disease surveillance system; 2) provide technical support to local health departments, health care providers, laboratories, schools and other population health partners; 3) conduct investigations of outbreaks of infectious and other diseases, often in partnership with local health departments; 4) develop and implement special epidemiologic projects, evaluations and assessments designed to improve program planning and administration; 5) provide education and training to population health partners regarding surveillance and epidemiology, infectious disease, environmental health and other issues; and 6) contribute to workforce development efforts through partnerships with academic institutions, including senior staff with adjunct faculty appointments, serving on student internship and practicum committees, guest lectures, etc.

2009 ACCOMPLISHMENTS

- BSE is fulfilling a critical function in the public health response to the 2009 H1N1 influenza A pandemic which affected Kansas very early. The ninth and tenth cases confirmed in the U.S. occurred in Kansas residents, and Kansas was the first state that did not share a border with Mexico to report confirmed cases. In addition to the direct support and technical assistance provided during the very intensive, case-based investigations and surveillance that occurred early in the pandemic, BSE staff developed and implemented a comprehensive surveillance system to provide state-level, regional, and local information that has been crucial to assessing the impact of the pandemic and for planning purposes.
- Throughout the year BSE staff investigated, in conjunction with local health department staff, more than 40 disease outbreaks. These included more than 30 foodborne illness and enteric disease outbreaks, including one of the largest incidents of illness resulting from alleged intentional food contamination ever reported in the U.S. In August 2009, BSE staff collaborated with multiple federal, state, and local agencies in an investigation involving the alleged intentional contamination of food on two separate occasions at a restaurant that resulted in at least 48 persons reportedly becoming ill. Two persons were criminally charged in conjunction with these incidents. Other outbreaks have included waterborne diseases, such as cryptosporidiosis, vaccine-preventable diseases, such as varicella (chickenpox), pertussis (whooping cough), meningitis and others.
- BSE staff have been instrumental in the development and implementation of several new programs that will provide important information for insight to public health planning. BSE was awarded new funding as part of the American Reinvestment and Recovery Act to develop a state plan to reduce healthcare-associated infections (HAI) and to implement a surveillance system for HAIs; additional Recovery Act-funded projects include a study to assess the effectiveness of rotavirus vaccine in partnership with Children's Mercy Hospital in Kansas City, MO, as well as a study to assess the effectiveness of meningococcal conjugate vaccine and improve surveillance of other high-priority vaccine-preventable diseases. Through a collaborative process led by BSE staff, KDHE was also successful in acquiring new funding as part of the National Environmental Public Health Tracking Network. This new program is a key component of the newly formed Bureau of Environmental Health, and BSE staff will continue to play key roles in this program.

Contact Information

Bureau of Surveillance and Epidemiology

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BUREAU OF CHILD CARE AND HEALTH FACILITIES

The purpose of the Bureau of Child Care and Health Facilities is to protect and promote public health through the licensing and surveying of child care and health care facilities in Kansas, as well as the credentialing of various health occupations. The bureau has three goals:

- Assure medical care facility patients, health care recipients, and children in care receive the highest level of care and services practical in accordance with state and federal regulations.
- Complete state licensing and federal certification survey processes, including follow-up surveys and complaint investigations to assure the adequate care and treatment of patients in safe, sanitary and functional environments in Kansas health care facilities. Certification processes are prescribed by the Centers for Medicare and Medicaid Services (CMS).
- Promote and assure safe, healthy and accessible care for children and maternity patients.

PROGRAMS/SECTIONS

Child Care Licensing and Registration regulates more than 11,000 child care facilities and family care homes. In order to be responsive to the citizens of Kansas and design a child care system for the 21st century, the program is undergoing a systems review of policies, procedures and regulations. This review incorporates a Best Team process, which successfully addressed issues for family foster homes resulting in statute changes, systems improvements and more meaningful regulation. A Best Team has been formed and is working to address child care and the licensing system. To begin the process, KDHE conducted 10 listening tours across the state to hear what providers, consumers and interested citizens see as the prevailing and emerging issues for child care.

The **Health Facilities Program** regulates 859 health care facilities and conducts more than 300 surveys each year. The program licenses and/or certifies medical care facilities (i.e. hospitals, critical access hospitals and ambulatory surgery centers) and non long-term-care entities (i.e. licensed or certified home health agencies, rural health clinics, OPPT, ESRDs, hospice providers and mobile x-ray). Its programs exist to assure quality care through two primary means — establishing licensing standard and inspecting facilities to assure these standards are being met.

The **Health Occupations Credentialing** program licenses or certifies the following occupations: Adult Care Home Administrators (640), Dietitians (836), Speech-Language Pathologists (1,644), Audiologists (203), Certified Nurse Aides (45,905), Certified Medication Aides (8,794), Home Health Aides (6,028) and Operators (1,956). In addition, this program maintains a comprehensive registry of certified nurse aides, which includes records of abuse, neglect, exploitation and criminal history. The program processed 134,264 inquiries to the Nurse Aide Registry and 27,237 criminal record checks in 2009.

BUREAU OF CHILD CARE AND HEALTH FACILITIES

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2009 ACCOMPLISHMENTS

- The Health Occupations Credentialing Program developed and adopted an updated Certified Nurse Aide Curriculum and Examination, effective June 12, 2009, along with an updated Sponsor/Instructor manual effective July 1, 2009. In October the Physical Therapy Assistant/Occupational Therapy Assistant Bridge Course for Nurse Aide Certification was updated. In addition, the guidelines and test for the Operator course was updated, as well as the guidelines for the Activity Director and Social Service Designee course.
- Three Technical Committee reviews of applications for credentialing were completed in accordance with the Health Occupations Credentialing Act. The three professions seeking either initial credentialing or a change in the level of credentialing are: perfusionists (seeking licensing); addictions counselors (seeking a change from registration to licensure) and massage therapists (seeking licensure). The program also completed an extensive update of the web site for the Board of Adult Care Home Administrators.
- Kansas was one of only 12 states to be granted Recovery Act funds for the purpose of implementing a new survey process for ambulatory surgery centers, focusing on infection control issues. The training program developed for this is a model for states implementing the process in FY2010. The program also implemented a customer satisfaction survey so that providers can assess surveyor performance. This survey was recognized by the Association of Health Facility State Survey Agencies at its annual conference. A redesign of the process for electronically providing facilities with deficiency statements and accepting plans of correction electronically was completed. A decision tree to determine when in-home care is required to be licensed was developed and made available on the web site. The program also exceeded workload requirements for the budget appropriated by the Centers for Medicare and Medicaid.
- A joint effort with Missouri resulted in development of a Bi-State Credential to qualify program directors of licensed child care facilities to work in either state. The two states implemented a pilot project to promote and implement this initiative in 2009.
- Requirements were adopted for a new category of residential facility called Psychiatric Residential Treatment Facilities. This new category will enable Kansas to access Medicaid funding for services to children in these facilities. Existing facilities were successfully transitioned into this category, and joint oversight responsibilities were resolved with the Department of Social and Rehabilitation Services.

Contact Information

Bureau of Child Care and Health Facilities

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Web site www.kdheks.gov/bcchf

BUREAU OF ENVIRONMENTAL HEALTH

To further protect the health and environment for all Kansans the KDHE Secretary in July 2009 established the Bureau of Environmental Health (BEH). BEH combines the activities of the Healthy Homes and Lead Hazard Prevention Program and the Radiation and Asbestos Control Section, (formerly located within the Bureau of Air and Radiation) and is the home of the newly established Environmental Public Health Tracking Program. The Bureau of Environmental Health seeks to protect the health of all Kansans by connecting environmental problems and associated public health concerns through coordinated comprehensive surveillance and responsible hazard exposure prevention.

PROGRAMS/SECTIONS

The **Healthy Homes and Lead Hazard Prevention Program** coordinates statewide lead poisoning prevention activities, including blood lead testing, environmental investigation, medical follow-up, and case management of children with elevated blood lead levels. The program promotes lead poisoning prevention and home safety through educational outreach and the distribution of assistance materials. The program enforces rules and regulations regarding lead based paint activities including renovation/remodeling practices in residential settings to ensure the safe elimination of lead hazards. The program provides support to local health agencies, industry and the public to ensure that Kansas families are protected not only from lead poisoning but from other injury and illness associated with health hazards found in the home environment.

The **Radiation and Asbestos Control Section** protects the public and the environment from the harmful effects of man-made sources of radiation, environmental radiation and asbestos. This includes administering the Radiological Emergency Response program, the Environmental Radiation Surveillance program, the Kansas Radon Program, the Radioactive Materials and X-Ray Control programs, the Asbestos program and the Right-to-Know program. The Radiological Emergency Response program provides planning, training and operational radiological response to all radiation incidents in Kansas. The Environmental Radiation Surveillance program detects, identifies and measures any radioactive material released to the environment by the Wolf Creek Generating Station and provides oversight in the cleanup of other sites contaminated with radioactive materials. The Kansas Radon Program performs outreach and education to the citizens of Kansas on the harmful effects of radon gas, how to test for it, and how to repair structures to mitigate the health threat posed by radon gas. The Radioactive Materials and X-Ray Control programs regulate the commercial and medical uses of ionizing radiation in Kansas. The Asbestos program monitors the removal of asbestos from building renovations and demolition projects. This program also certifies contractors and issues licenses to asbestos workers to ensure trained personnel conduct appropriate removal activities. The Right-to-Know program receives information regarding chemical storage and releases into ambient air and makes this information available to the public.

The **Environmental Public Health Tracking Program** is developing applications to collect, analyze, interpret and publish environmental health data indicators as part of the National Environmental Public Health Tracking Network.

Development of the network is part of a national initiative led by the Centers for Disease Control and Prevention and will include the development of a web-based system to track key environmental hazards and health problems across Kansas. When implemented, the tracking network will help identify threats to the health of Kansans posed by the environment and will improve how KDHE can respond to those threats. When completed, individuals will be able to access environmental health information that will help them make informed decisions and take action to protect themselves and their families. Timely, integrated environmental and health data at the federal, state and local levels via the national and state tracking networks will also provide a basis for early notification of pending environmental threats or hazards arising from unforeseen events.

BUREAU OF ENVIRONMENTAL HEALTH

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2009 ACCOMPLISHMENTS:

- The Radon Program facilitated the protection of 2,041 families in Kansas through the installation of mitigation systems and the use of radon-resistant construction building techniques for new homes.
- The Radiation Control section successfully passed the Wolf Creek Emergency Response exercise evaluated by the Federal Emergency Management Agency (FEMA).
- BEH assisted in the characterization and remediation of sites contaminated with Radium-226 in more than 40 locations.
- The X-ray inspection program inspected 990 machines in more than 600 facilities in the state and took action to correct concerns at more than 40 percent of these locations.
- The Healthy Homes Program monitored the screening of more than 32,000 children and 5,000 adults in Kansas for elevated amounts of blood lead, and assisted more than 150 families with confirmed lead poisoned children.
- BEH administered U.S. Department of Housing and Urban Development grant funding for the remediation of lead in housing in Kansas City, KS, where more than 600 homes have now been made lead-safe for families with children and limited financial resources.

Contact Information

Bureau of Environmental Health

785-296-5606

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BUREAU OF DISEASE CONTROL AND PREVENTION

The Bureau of Disease Control and Prevention (BDCP) programs respond to the state's leading health problems in the areas of communicable diseases and address components from all three core functions of public health – assessment, policy development and assurance. BDCP provides immunization vaccines for children; counseling and testing for HIV; medications to people with AIDS, STDs and tuberculosis; partners' notification for infectious diseases; establishing partnerships with medical and community organizations to identify, counsel and treat people at risk for infectious/contagious diseases and immunize Kansas citizens against vaccine-preventable diseases.

PROGRAMS/SECTIONS

The **Immunization Program** seeks to maximize the protection of Kansas children and adults from vaccine-preventable diseases. The program aids in the distribution of vaccines to local health departments and private providers for low-income, underinsured and uninsured children. The program assists vaccine providers and conducts periodic surveys of immunization coverage as well as manages KWebIZ, the state's immunization registry. Program staff began the vaccination planning effort for the pandemic H1N1 influenza during the summer of 2009 and has managed the vaccine allocation, ordering and distribution of nearly 800,000 doses of vaccine in the two and one-half months since the H1N1 Vaccination Campaign began October 1, 2009.

The **Kansas HIV/AIDS Program** works to promote public health and enhance the quality of life for Kansas residents by the prevention, intervention and treatment of HIV and AIDS. The mission will be accomplished through policy and resource development, clinical data collection and analysis, research, education, prevention programs, disease detection and the provision of treatment and clinical care services.

The **STD Program** works to reduce morbidity and mortality from chlamydia, gonorrhea, syphilis and HIV in Kansas by providing a continuous network of surveillance, intervention, prevention and education across the state.

The **Tuberculosis Control Program and Adult Viral Hepatitis Programs.** The Tuberculosis program seeks to assure that proper screening and treatment for tuberculosis occur in Kansas. Program staff serves as a resource for local health departments and other providers who deliver care to persons with tuberculosis and their contacts. The program provides medications which assure proper treatment of patients with infectious tuberculosis. The Adult Viral Hepatitis Section coordinates the high risk hepatitis vaccine program and provides Hepatitis prevention education.

2009 ACCOMPLISHMENTS

- KWebIZ, the statewide immunization registry, continues to see success. More than 1.6 million patients are enrolled in the system and 44 new immunization provider sites were enrolled during 2009, bringing the total to 244 provider practices on the system, including the local health departments in all 105 counties. The KWebIZ school module has also been accessed by 312 schools in 76 school districts to date. In August 2009, a module was added to KWebIZ to manage H1N1 vaccine inventory and assist local health departments with patient-level documentation of H1N1 vaccinations that began the first of October. As of December 11, 2009, 646,100 doses of H1N1 vaccine inventory had been managed through the KWebIZ Countermeasure Response Administration module and KWebIZ program staff.

BUREAU OF DISEASE CONTROL AND PREVENTION

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- The HIV Counseling and Testing program transitioned from manual data entry to an electronic scanning process which will allow for more efficient data submission to the Centers for Disease Control and Prevention. In March 2009 two Linkage to Care coordinators were hired to increase access to service for newly diagnosed positive HIV persons. In collaboration with the STD Disease Intervention Specialist employees, a comprehensive and coordinated effort was launched to provide this connection and care to this targeted population. The HIV Surveillance Program began conducting active core surveillance in April 2009.
- The STD Program is developing an internet-based information management system. Its framework is based on management information systems currently being used by STD programs in several other states. The STD Program anticipates cost savings and more timely disease intervention due to the introduction of this new management information system. The system is expected to go online in January 2010.
- The TB Prevention and Control Program has been working with colleges and universities to advance their TB screening programs of higher risk individuals with the use of a new blood test for detection of TB infection. This past year, all of the major universities began using this test and saw a dramatic decrease in the resources required to conduct screening. This program saved fiscal resources for the universities and provided improved results for the students.
- The Adult Viral Hepatitis Prevention Program has successfully worked with the Immunization Program, the HIV/AIDS Program, the STD Program and the Bureau of Surveillance and Epidemiology to grow the Adult Viral Hepatitis Vaccine Initiative from three pilot sites to 13 around the state. Eligible adults at risk for viral hepatitis infections are now able to receive hepatitis A and/or hepatitis B immunizations at varying sites including local health departments, primary care STD clinics, substance abuse treatment centers, and community health centers. The Adult Viral Hepatitis Prevention Program has distributed nearly 500 doses of Hepatitis vaccine to high risk patients in 2009.

Contact Information

Bureau of Disease Control and Prevention

Phone: 785-368-6427

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Kansas HIV/AIDS Program 785-296-6174

Kansas Immunization Program 785-296-5591

Kansas Tuberculosis Program 785-296-5589

STD Section 785-296-5596

BUREAU OF FAMILY HEALTH

The mission of the Bureau of Family Health is to provide leadership to enhance the health of Kansas women and children through partnerships with families and communities. The bureau has three goals:

- Improve access to comprehensive health, developmental and nutritional services for women and children, including children with special health care needs.
- Strengthen Kansas' maternal and child health infrastructure and systems to eliminate barriers to care and to reduce health disparities.
- Improve the health of women and children in the State through prevention/wellness activities, focus on social determinants of health, adopting a life-course perspective, and addressing health equity.

PROGRAMS/SECTIONS

The bureau supports a statewide system of public health services for the maternal and child health population through four sections:

The **Children and Families Section** provides infrastructure support to public health in serving women prior to pregnancy and to pregnant women, infants, children and adolescents.

Services for **Children with Special Health Care Needs** provides medical specialty services, supplies and statewide system access for children and youth with complex medical conditions.

Children's Development Services provides newborn metabolic and hearing screening follow-up and early intervention services for infants and toddlers with disabilities.

Nutrition and WIC (Women, Infants and Children) Services provides nutrition education (including breastfeeding support), supplemental foods and referrals to other health services to low-income pregnant, breastfeeding and postpartum women and their children up to age five.

2009 ACCOMPLISHMENTS

- Implemented the new WIC food package guidelines emphasizing lower-fat milk, whole-grain breads and cereals, fruits and vegetables, baby food fruits and vegetables, beans, and more varieties of canned fish. This involved a major statewide education effort for participants, grocery stores, and local health departments. It involved major changes to the WIC data system.
- WIC served an average of more than 79,150 women, infants and children per month; this is 6,550 more participants per month than the prior year.
- Assured that more than 41,000 infants born in Kansas received the recommended newborn screens for hearing and metabolic conditions.
- Worked with the Perinatal Council of Kansas, the Kansas Chapter of the American Academy of Pediatrics, Kansas' American College of Obstetrics and Gynecology and others to disseminate H1N1 provider and patient education materials for groups that were prioritized for early vaccination: pregnant women, young children and children with special medical conditions.
- Children and Youth with Special Health Care Needs (CYSHCN) staff provided case management, treatment and financial assistance to more than 4,100 children, adolescents and their families. Through a contractual system, CYSHCN assured that medical specialty services are accessible to any family in the state regardless of geographic location.
- Through MCH and Family Planning grants, more than 44,000 children and youth received screenings, well-child checkups and other services through the local health departments. Almost 10,000 pregnant women received prenatal care coordination. More than 41,000 women received women's health services.

Contact Information

Bureau of Family Health

Phone: 785-291-3368 Make a Difference: 1-800-332-6262 Nutrition and WIC Services: 785-296-1320

Web site: www.kdheks.gov/bcyf

BUREAU OF PUBLIC HEALTH INFORMATICS

The goal of the Bureau of Public Health Informatics (BPHI) is to provide vital records, data and information to the agency, the public, policy makers, program managers and researchers. The bureau is comprised of the Offices of Vital Statistics and Health Assessment.

PROGRAMS/SECTIONS

The **Office of Vital Statistics** registers births, stillbirths, deaths, marriages and divorce certificates and issues certified copies of these records available to legally entitled individuals. The core of the Vital Statistics system is a web-based application for internal and external processing, providing access to hospitals, funeral homes, and courts across the state.

The **Office of Health Assessment** has responsibility to provide support to the Division of Health, state government and the public health community with research and analysis of the various sources of health data within Kansas.

2009 ACCOMPLISHMENTS

- The final phase of the re-engineering of the Vital Statistics system, the Electronic Death Registration System (EDRS), was implemented in July 2009. EDRS allows electronic filing of death certificates with electronic signatures, expedites notification of death to the Social Security Administration (SSA) and other external partners, and provides timelier customer service to funeral homes and the customers of the Office of Health Assessment.
- Collaborated with the Bureau of Environmental Health to facilitate data for the Environmental Public Health Tracking Network.
- Conducted training sessions for public health workforce in using Medicaid and private insurance data for public health assessment and evaluation.
- Assisted the Workers Compensation Division in developing its fee schedule for workers compensation insured population.

Contact Information

Bureau of Public Health Informatics

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Web site: www.kdheks.gov/ches

Kansas Information for Communities (KIC): <http://kic.kdhe.state.ks.us/kic/>

BUREAU OF PUBLIC HEALTH PREPAREDNESS

The mission of the Bureau of Public Health Preparedness (BPHP) is to provide leadership on preventing, detecting, reporting, investigating, controlling and recovering from human illness related to chemical, biological and radiological agents, as well as naturally occurring human health threats.

The bureau works in all-hazards preparedness, focusing on preparing for and responding to natural disasters, disease outbreaks and acts of terrorism. Close collaboration with the state's local health departments, hospitals and emergency medical services providers continues to improve preparedness at the community level.

BPHP continues to help coordinate the state-level response to the 2009 H1N1 influenza A pandemic that began in April 2009. The aspects of this response include a statewide vaccination campaign, of unprecedented scope and magnitude being administered by the Kansas Immunization Program, community mitigation activities, disease surveillance and epidemiology, laboratory analysis, antiviral and personal protective equipment distribution, risk communication, and public health education. BPHP partners with local health departments, hospitals, the Kansas Adjutant General's Department and the federal Centers for Disease Control and Prevention (CDC) in this effort.

2009 ACCOMPLISHMENTS

- The bureau facilitated the 2009 Governor's H1N1 Pandemic Influenza Summit held on August 24, 2009 at seven locations throughout Kansas. More than 800 attendees participated either in person or by videoconference. U.S. Secretary of Health and Human Services and former Kansas Governor Kathleen Sebelius opened the summit via teleconference.
- BPHP worked with the Governor's Office and the Kansas Adjutant General's Department to conduct a pandemic influenza tabletop exercise for Governor Parkinson and his Cabinet on August 4, 2009. Additionally, a majority of Kansas hospitals (approximately 73 percent) participated in the statewide pandemic flu tabletop exercise conducted by BPHP in September 2009. BPHP also hosted the March Health Madness exercise that involved players representing local health departments, hospitals and emergency management, as well as other KDHE programs.
- BPHP developed a new local health department mass dispensing standard operating guide. Some counties are using these plans as the basis for their 2009 H1N1 flu vaccination clinic operations. The bureau also deployed the Kansas Countermeasure and Response Administration plan, and worked with the Kansas Immunization Program to incorporate H1N1 vaccination inventory tracking and dose level administration tracking into this plan.
- A National Incident Management System-compliant hospital emergency operations plan template was developed and released for use by Kansas community hospitals. The bureau continues to work as the lead for the development of the KDHE continuity of operations plan and KDHE review and revision of the Kansas Response Plan.
- BPHP enhanced its communication activities with stakeholders and the public by helping to establish and maintain a Web site and toll-free hotline to provide educational information about the 2009 H1N1 flu and vaccine, and to make H1N1 educational brochures available to local health departments and hospitals free of charge. The bureau also supported the "H1N1 – 1 Bad Bug" public education campaign implemented by the KDHE Communications Office, and deployed upgrades to the statewide Health Alert Network public health emergency alerting and notification system.

Contact Information

Bureau for Public Health Preparedness

Phone: 785-296-8605

Web site: www.ksprepared.org

DIVISION OF ENVIRONMENT

The mission of the Division of Environment is to protect the public health and environment for Kansas. To implement this mission, the Division of Environment has adopted the following goals:

- **Assurance** - Implement environmental programs in Kansas to achieve regulatory compliance and maintain assurance that environmental programs are protective of public health and the environment.
- **Policy Development** - Be responsive to the needs and inquiries of the citizens of Kansas and the regulated community with respect to environmental programs.
- **Assessment** - Provide citizens of the state with accurate assessments of the environmental conditions of the state.

In order to fulfill this mission and meet these goals, the Division of Environment has developed and implemented regulatory, compliance assistance, monitoring and educational programs within each of the bureaus and the division as a whole.

BUREAU OF AIR

The mission of the Bureau of Air (BOA) is to protect the public and the environment from air pollution. The bureau's goals address issues commonly known to cause serious potential harm to public health and the environment, and threaten economic stability. The efforts of the BOA to conserve air quality, control air pollution and protect the public health begin by providing quality customer service.

PROGRAMS/SECTIONS

The **Air Compliance & Enforcement Section (ACES)** is responsible for determining compliance and if needed, issuing enforcement actions due to non-compliance. Depending on the type and quantity of emissions, sources are required to obtain permits and conduct activities such as testing, monitoring, recordkeeping and reporting to demonstrate compliance. The ACES staff uses a combination of inspections, performance test evaluations, report reviews, technical assistance and enforcement actions to ensure facilities comply with applicable air quality regulations and permits.

The **Air Permitting Section (APS)** is responsible for reviewing air quality control permit applications and issuing permits for air emissions in accordance with state and federal air quality regulations. Air quality control permits are issued with the goals of conserving air quality, controlling air pollution and providing quality service to customers.

The **Air Monitoring and Planning Section** administers the air monitoring and modeling program and the emissions inventory program. In cooperation with three local agencies, section staff operate an air monitoring network, which provides air quality data from 25 sites around the state. The monitoring data is analyzed to determine compliance with federal standards and to evaluate air quality trends. Other activities include providing outreach on air quality improvement and indoor air quality education.

2009 ACCOMPLISHMENTS

- The Bureau of Air was awarded \$4 million by the EPA to reduce diesel fleet emissions in Kansas under the Diesel Emissions Reduction Act. The bureau also received an additional \$1.73 million to reissue the Kansas Clean Diesel Program grant competition in 2009 for public and private fleet owners and operators across the state.
- The bureau set up lead monitoring for the State as per the requirements of the newly lowered National Ambient Air Quality Standards (NAAQS). Monitoring begins on January 1, 2010.
- The bureau submitted its Regional Haze State Implementation Plan to EPA for approval.

Contact Information

Bureau of Air

Phone: 785-296-1593

Web site www.kdheks.gov/bar

BUREAU OF ENVIRONMENTAL FIELD SERVICES

The Bureau of Environmental Field Services (BEFS) provides service to the public and to the other Division of Environment bureaus through regulatory and compliance efforts, complaint and emergency response, environmental monitoring and assessment, and pollution prevention efforts. This bureau often serves as the public's first point of contact for investigation and assistance. BEFS maintains a central office in Topeka as well as six district offices, located in Chanute, Dodge City (with a satellite office in Ulysses), Hays, Lawrence, Salina and Wichita. The activities of the bureau directly support the division's air, water, waste management and storage tank regulatory programs. These activities are implemented under working agreements between BEFS and the other four bureaus.

2009 ACCOMPLISHMENTS

- BEFS District Office staff conducted hundreds of routine compliance inspections during the past year. They assisted other bureaus in the Division of Environment with a wide range of activities such as site investigation, permitting and enforcement activities. In addition, they provided direct attention to local needs around the state by investigating spills, illegal disposal, and reports of fish kills or other unhealthy conditions in Kansas lakes or streams. When a natural disaster occurs, district staff support the affected cities or counties to assist in waste removal, as well as restoration of water and wastewater treatment, and other basic needs.
- The bureau hosted the 2009 Kansas Environmental Conference in August. The goal of the conference was to provide businesses, community leaders, consultants and the public with an understanding of new regulations, current trends in environmental quality, new technologies, advantages of pollution prevention. Approximately 350 people attended the conference, which was held in Wichita.
- The bureau contracted with Kansas State University's Pollution Prevention Institute (PPI) for the Small Business Environmental Assistance Program and the Pollution Prevention (P2) Program. Under these two programs, PPI provided technical assistance via hotline and e-mail to over 850 requests and also performed approximately 35 on-site visits for technical assistance. In addition to the technical assistance, PPI hosted webinars, workshops and seminars on air quality and water quality topics and continued with a P2 intern program in which students are placed at a facility for a summer internship for the purpose of researching and implementing pollution prevention and energy efficiency projects.
- BEFS staff working out of Topeka implemented the department's statewide water quality monitoring programs, initiated a new system for uploading water quality data to the federal (EPA) Water Quality Exchange, analyzed recent fish tissue contaminant data and updated the state's list of fish consumption advisories, participated in EPA's National Rivers and Streams Assessment, and secured Recovery Act funding to facilitate the identification and protection of the state's highest quality streams.

Contact Information

Bureau of Environmental Field Services

Phone: 785-296-6603 FAX: 785-291-3266

Web site: www.kdheks.gov/befs/

Small Business Public Advocate 1-800-357-6087 or 785-296-0669

Northeast District, Lawrence 785-842-4600

North Central District, Salina 785-827-9639

Northwest District, Hays 785-625-5663

Southeast District, Chanute 620-431-2390

South Central District, Wichita 316-337-6020

Southwest District, Dodge City 620-225-0596

BUREAU OF ENVIRONMENTAL REMEDIATION

The Bureau of Environmental Remediation (BER) works to protect and preserve our state's water supply, both ground water and surface water, as well as the health and welfare of Kansans, from the effects of environmental contamination. The bureau houses a number of programs whose primary function is to identify, investigate and remediate contaminated areas of the state. The bureau provides a framework of policies and quality assurance and quality control procedures to insure collection of consistent reliable data. Important elements of the framework are consistent cleanup standards and priority ranking systems used to ensure that limited resources are focused on the sites that pose the greatest risk to the general public.

Contaminated sites are referred to the bureau through a variety of mechanisms, including environmental audits, spill reporting, self-reporting of contamination, referrals from U.S. EPA or other government agencies, routine sampling of water supply wells, or complaints from the public. Threatened or impacted drinking water supplies are of primary concern and consequently receive high priority to protect and restore safe drinking water supplies.

PROGRAMS/SECTIONS

The **Assessment and Restoration Section** is responsible for corrective action at landfills; tracking and clean-up at emergency spill response sites; administration of the Drycleaning Facility Release Trust Fund; state oversight of U.S. EPA National Priorities List "Superfund" sites; state oversight of U.S. Department of Defense sites; and implementing natural resource damage and assessment activities.

The **Remedial Section** is responsible for assessment, investigation, cleanup, monitoring, and long-term stewardship of contaminated sites throughout Kansas. The Remedial Section accomplishes its goals through various cleanup programs and works in a cooperative partnership with the public, industry and local government. The programs include the Site Assessment program, State Cooperative program, Voluntary Cleanup and Property Redevelopment program, Brownfields program, State Orphan Sites program, and the Environmental Use Control program .

The **Storage Tank Section** is responsible for the enforcement of state and federal storage tank regulations designed to prevent releases of petroleum and hazardous substances from storage tanks that impact the health and safety of the citizens of the state and for corrective action at petroleum storage tank release sites. The section administers the Underground Storage Tank and Aboveground Storage Tank Release Trust Funds which provide tank owners and operators with a financial mechanism to address releases of petroleum from their storage tanks. The programs are funded through a \$0.01 tax per gallon of fuel sold in the state.

The **Surface Mining Section (SMS)** consists of three basic programs; the Administration and Enforcement Program is responsible for issuing of new coal mining permits, inspecting active permitted coal mines, and enforcing regulations pertaining to active coal mining operations; the Abandoned Mine Land Program reclaims coal mines abandoned prior to the passage of PL 95-87; and the Emergency Program which abates coal mining related hazards that have an immediate and imminent impact on the health and safety of the public.

BUREAU OF ENVIRONMENTAL REMEDIATION

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2009 ACCOMPLISHMENTS

- In 2009, the Brownfields program completed 54 assessments of sites that now have the potential to be redeveloped throughout the state. The assessments determine the environmental condition of the property at no cost to the local government, and can be performed before the municipality takes title to the property. The Brownfields program offers communities an excellent opportunity to return underutilized properties to productive use.
- Siemens Energy (Siemens) had identified a 109-acre lot in Hutchinson's Salt City Business Park as one of the final options for the company's new \$50 million wind turbine manufacturing facility. However, environmental investigations showed the property to be contaminated. The BER Voluntary Cleanup and Property Redevelopment Program worked with Siemens in 2009 to confirm that the groundwater contamination had originated from an off-site source that had already been cleaned, and subsequently provided a "No Further Action" determination, limiting the company's liability for the contamination. This action by KDHE allowed Siemens' selection of the property in Reno County as the location for the new facility. The Kansas Department of Commerce estimates the factory will employ 400 Kansans.
- Throughout the year BER performed corrective actions at drycleaning facilities in 28 cities throughout the state. A variety of actions were performed including soil and groundwater investigation/monitoring, designs of remedial systems, the construction of treatment systems to address soil and groundwater contamination, and installation of vapor mitigation systems to help prevent contamination of indoor air in nearby residences.
- The bureau provided 24-hour spill response coverage for the Division of Environment and took in 640 spill reports with 277 sites visited by agency staff. Twenty-nine spills required additional assessment and long-term remediation. Included were five mercury spills that required agency response.
- The Storage Tank program has implemented dozens of remedial systems to treat petroleum contaminated public water supply wells resulting from petroleum releases at storage tank sites across the state. These treatment systems continue to operate and currently provide 140,000 Kansas citizens with safe, clean, drinking water. The water treatment systems serve Atwood, Colby, Ellis, Hanston, Hays, LaCrosse, Manhattan, Manter, Miltonvale, Moscow, Oakley, Park, Park City, Quinter, Salina, Satanta, Scott City and White City.

Contact Information

Bureau of Environmental Remediation

Phone: 785-296-1660

Web site www.kdheks.gov/ber

BUREAU OF WASTE MANAGEMENT

The mission of the Bureau of Waste Management (BWM) is to minimize the health and environmental impacts associated with the generation, storage, transportation, treatment and disposal of all solid and hazardous waste in Kansas. The bureau combines traditional regulatory activities such as permitting and inspections with technical and financial assistance. Conferences, workshops and technical newsletters target businesses and local governments that generate or manage waste at landfills, transfer stations, incinerators, processing facilities, compost sites, recycling centers and private businesses. Solid waste grant programs provide financial aid to stimulate recycling, e-waste collection, composting and household hazardous waste collection. The bureau also administers the “Kansas Don’t Spoil It” public education campaign to increase awareness regarding proper waste management methods.

PROGRAMS/SECTIONS

The **Solid Waste Permits Section** of the Bureau of Waste Management administers a broad permit program to ensure that all solid waste facilities are operated in a manner that protects human health and the environment. Permitted facility types include composting, construction/demolition landfills, household hazardous waste collection centers, incinerators, industrial landfills, landfills, medical waste processors, mobile tire processors, municipal solid waste landfills, solid waste processors, tire collection centers, tire monofills, tire processing facilities, tire transporters and transfer stations. This section also oversees the county solid waste planning process.

The **Hazardous Waste Permits Program** is responsible for administering the federal Resource Conservation and Recovery Act (RCRA) Subtitle C permits and other enforceable orders and agreements related to the storage and treatment of hazardous wastes. This includes overseeing hazardous waste combustion in two cement kilns and remedial work at Kansas businesses that presently manage hazardous waste, or did so in the past.

The **Compliance Assistance & Enforcement Section** administers an enforcement program that ensures that all generators and handlers of solid and hazardous waste comply with applicable laws and regulations. The section uses a balance of traditional enforcement and technical assistance tools to accomplish this goal. The section also manages multiple databases related to monitoring and recording compliance at all Kansas facilities. The section administers the statewide illegal dump clean-up program, the special waste disposal authorization program and the household hazardous waste collection center program.

The **Waste Reduction, Public Education and Grants Unit** administers multiple non-regulatory programs designed to improve waste management in Kansas. Grant programs are related to recycling, composting, e-waste collection and waste tire recycling. Public education and awareness efforts include the “Kansas Don’t Spoil It” program, the “Get Caught Recycling” program, the “Green Schools” initiative and “Friday Facts” which is a biweekly electronic newsletter containing various environmental guidelines and tips. This unit also coordinates waste reduction activities with state, regional and national organizations.

BUREAU OF WASTE MANAGEMENT

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2009 ACCOMPLISHMENTS

- The bureau continued the “Green Schools” initiative, including the school registration program and the grant program that provides funding for K-12 schools to encourage waste reduction activities such as recycling, composting, and making product substitutions to eliminate potentially hazardous cleaning chemicals. Hundreds of schools have now registered their “Green Teams” and 53 grants totaling \$155,112 have been awarded to schools of all size. All the grant-funded projects must include direct environmental benefits along with educational learning objectives and student involvement.
- The bureau completed the initial work related to establishing pre-selected on-site or burial sites at animal feeding facilities for animals that may become infected by a foreign animal disease such as “foot and mouth.” At the end of 2009, about 750 burial sites had been identified covering nearly all of the large and medium-sized facilities in the state. Additional sites may be added in the future and the existing facilities will be regularly updated to ensure that information is accurate and adequate for the number of animals on-site.
- The six regional e-waste collection centers became fully operational in 2009 and expanded service to about 70 counties. These centers received capital improvement grants from the solid waste program and are operating under two-year start-up contracts to properly manage and recycle all recovered e-waste. The bureau’s goal was to jump-start these collection centers with the hope that they will become self-sustaining long-term programs.
- Under the bureau’s guidance, landfill gas recovery projects expanded to include several more facilities. Rather than vent or flare valuable methane gas, several new landfills began work to recover this gas for various beneficial uses. The expansion of landfill recovery projects has and will include cooperative efforts with other industrial and public works activities that also generate methane gas through anaerobic biodegradation processes.
- One of the few remaining areas in Kansas without a household hazardous waste collection center (southeast Kansas) is now covered by a newly permitted facility in Pittsburg. This KDHE grant-funded facility, which combines HHW collection with e-waste collection, will serve a multi-county area. It will be operated by SEK Recycling, a private non-profit organization, and financially supported by Crawford County as the “host” county as well as several neighboring counties.

Contact Information

Bureau of Waste Management

Phone: 785-296-1600

Web sites: www.kdheks.gov/waste and www.kansasdontspoilit.com

BUREAU OF WATER

The mission of the Bureau of Water (BOW) is to protect and improve the health and environment of Kansas through effective regulation of waters of the state. The Bureau of Water is responsible for carrying out programs under the federal Clean Water Act and Safe Drinking Water Act. The various program activities include: permitting wastewater discharges; ensuring public water supplies provide safe, clean drinking water; water well construction; underground injection control; infrastructure financial assistance; livestock waste management; nonpoint source pollution control; training for water and wastewater plant operators; establishing surface water quality standards; and developing total maximum daily load criteria. These programs support the KDHE and Division of Environment missions of protecting public health and environment for Kansans.

PROGRAMS/SECTIONS

The **Geology Section** administers the Underground Injection Control (UIC), the Underground Hydrocarbon and Natural Gas Storage, Water Well Licensing, and Water Well Construction and Abandonment programs. The Geology Section also provides hydro-geologic and technical support for other programs in the Bureau of Water.

The **Industrial Programs Section** administers regulatory permitting programs for the handling, treatment and disposal of industrial wastewater; the pretreatment of industrial wastes directed to municipal wastewater collection and treatment systems; and the quality of stormwater runoff associated with industrial or construction-related activities subject to federal Clean Water Act provisions or Kansas surface water quality standards.

The **Livestock Waste Management Section** works to protect the waters of the state by educating and assisting the regulated community, reviewing and issuing livestock waste management permits, and ensuring compliance with applicable statutes, regulations and permitting requirements.

The **Municipal Programs Section** provides technical review and engineering approval of design plans and specifications for municipal and commercial wastewater collection and treatment systems, administers the Kansas Water Pollution Control Revolving Fund to provide low-interest loans to municipalities for wastewater system improvements, and coordinates with the bureau's Technical Services Section in the development of commercial and municipal permits for existing and new wastewater treatment systems.

The **Public Water Supply Section (PWSS)** is charged with regulating all public water supply systems in the state and assisting them in providing safe and potable water to the people of Kansas. The PWSS oversees 1,033 public water supply systems, including municipalities, rural water districts, and privately owned systems. These systems may serve small communities of several families, to a city of more than 300,000 people.

The **Technical Services Section (TSS)** provides engineering and operational surveillance of wastewater facilities, carries out a compliance and enforcement program, implements the statewide water and wastewater operator training and certification program, develops statewide surface water quality standards, and issues permits for new or expanded systems. TSS coordinates with the Bureau of Environmental Field Services to provide technical assistance and education to drinking water suppliers and wastewater treatment operators.

The **Watershed Management Section** implements Section 319 of the Clean Water Act, coordinating programs designed to eliminate or minimize pollution that does not come from the end of a pipe. The section develops and reviews strategies, management plans, local environmental protection plans and county environmental codes intended to control nonpoint source pollution.

The **Watershed Planning Section** implements Sections 303(d) and 303(e) of the Clean Water Act. The section is responsible for identifying and prioritizing impaired streams, lakes and wetlands, and for developing total maximum daily load (TMDL) criteria for high-priority water bodies as required by the Act.

2009 ACCOMPLISHMENTS

- Thirty low-interest state revolving loans for \$71 million were made for 30 municipal water quality projects across the state. Of this total, \$48 million was for 14 wastewater infrastructure projects, with another \$23 million going to 16 public water supply projects. The bureau made significant progress committing funding from the American Recovery and Reinvestment Act to Kansas water and wastewater projects.
- The Watershed Restoration and Protection Strategy Program (WRAPS) awarded funding to 32 projects totaling approximately \$2.47 million. There are 43 active WRAPS projects that cover nearly 60 percent of Kansas' geography. The Local Environmental Protection Program (LEPP) provided approximately \$1.07 million to local protection programs covering 103 counties to administer sanitary/environmental codes and implement local environmental protection plans.
- BOW developed and managed the 90th Annual Water and Wastewater Operators School in Lawrence. This three-day school was attended by more than 300 water and wastewater operators throughout Kansas who received training ranging from basic to advanced water and wastewater treatment.
- A new review team was initiated by the BOW. The Triennial Water Quality Standards review was developed, utilizing the expertise of 15 stakeholder groups.

Contact Information

Bureau of Water
Phone: 785-296-5500
Web site www.kdheks.gov/water

KANSAS HEALTH AND ENVIRONMENTAL LABORATORIES

The Kansas Health and Environmental Laboratories (KHEL) provide clinical and environmental testing in support of KDHE programs. The clinical laboratories also serve as a reference laboratory for local public health laboratory facilities and are a member of the national laboratory response network. The services provided include newborn screening for genetic disorders, infectious disease detection, chemical and radiological environmental testing, childhood blood lead prevention analysis, and emergency preparedness for detection of biological, chemical and radiological agents. The KHEL also provides certification for clinical and environmental laboratories providing services to Kansas and support for law enforcement agencies through the breath alcohol program.

2009 ACCOMPLISHMENTS

- Every two years, KHEL must pass an on-site assessment conducted by the regional office of Centers for Medicare and Medicaid Services to ensure it is meeting the requirements of the Clinical Laboratory Improvement Amendment of 1988 regulations. This year, it was noted that KHEL not only passed, but also had made great improvements over the last assessment.
- U.S. EPA also conducts on-site assessments of state environmental laboratories once every three years, and that review occurred in 2009. Three assessments were conducted over the year, one for the environmental microbiology, one for the radiochemistry and one for environmental chemistry. All three areas passed, and the laboratory will continue to be able to conduct EPA-certified testing for public water supplies in the State of Kansas.
- The Radiochemistry Laboratory became the fourth in the nation to receive an EPA grant to expand the laboratory's capability and capacity for analyzing samples in the event of a radiological event. The Kansas laboratory will act as a regional center for analysis.
- Staff in Virology/Serology and the Preparedness program were able to provide diagnostic testing for H1N1 in the initial outbreak of the virus, and now that its presence in Kansas has been established, the laboratory is providing surveillance testing for KDHE and confirmation testing for hospitalized patients. KHEL had increased testing capacity with the purchase of an additional instrument just prior to the H1N1 outbreak, which allowed for timely reporting in Kansas.
- The Health Chemistry section provided training for those collecting blood spots for the newborn screening program. This training helped to reduce the number of unsatisfactory specimens from a monthly high of 14 percent in March 2008 to a monthly average of three percent over the last several months.

Contact Information

The Kansas Health and Environmental Laboratories

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**For more information about KDHE programs and services,
please visit www.kdheks.gov or call 785-296-1500.**